## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885 or <u>Fax</u> maintenance fee notifications.

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Kent E. Genin	(Depositor's name)
LM Lh	(Signature)
September 14, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/036,861	12/21/2001	Michael George Gorman	8285/490	4336
TITLE OF INVENTION: TELECOMMUNICATION SYSTEM, M		YSTEM, METHOD AND SUBSCRIBER UNIT FOR USE TH	EREIN	

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL F	FEE(S) DUE	DATE	DUE
nonprovisional NO \$1400		0 \$300		\$1700		09/15/2006		
EXA	MINER	ART UN	IT	CLASS-SUBCLASS				
HARPER	R, KEVIN C	2616		370-352000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the n or agents	inting on the patent front page, linames of up to 3 registered paters OR, alternatively, ame of a single firm (having as d attorney or agent) and the nan red patent attorneys or agents. If a name will be printed.	nt attorneys	Brinks  Lic  2  3	Hofer one	Gilso

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SBC Properties, L.P.

Reno, Nevada

Please check the a	ppropriate assignee ca	tegory or categori	ies (will not be r	printed on the patent	)
	ppropriate assigner of		(	,	′

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-1925 (enclose an extra copy of this form).

lease check the appropriate assignee category or categories (will r	not be printed on the patent):	Individual Corporation or other private group entity	Government
a. The following fec(s) are enclosed:	4b. Payment of Fee(s):		
Issue Fee	A check in the an	ount of the fee(s) is enclosed.	
Publication Fee (No small entity discount permitted)	Payment by credi	card Form PTO-2038 is attached	

5. Change in Entity Status (from status indicated above)

□ a.	Applican	t claims S	SMALL ENTITY stat	us. See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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**Authorized Signature** 

Typed or printed name

Advance Order - # of Copies \_

E.\/Genin Kent

Registration No.

37,834

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